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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

RY None

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

RY

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/10/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> yes Allowance Examiner's Signature <u>RY</u> Initials	<input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY KY	SHEETS DRAWING 8	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 7
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## ADDRESS

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## TITLE

Image forming device with multimode duplexer

FILING FEE  RECEIVED 1546	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <div style="text-align: center;">mm</div>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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